FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State

Parties must be filed electronically.

Reset Form

2015 JAN -7 AM 7: 48

COMMITTEE NAME (Must be same as on Statement of Organ	nization)			
The Committee to Elect Dave Thompson			FORM	
IMPORTANT: Indicate by # type of committee you are reporting for: £ (1)Statewide/Legislative/Judge Standing for Retention Candidate (2) (4)County Central Committee (5)County Candidate (6)City Candid Subdivision Candidate (8)County PAC (9)City PAC (10)School B 11) Local Ballot Issue)State PAC (3)State Party ate (7)School Board or Other Politics		DR-2 (Rev. 12/2009) For Office Use On Comm. #	
CANDIDATE COMMITTEES ONLY:		-	ogged in	
Candidate Name	Political Party (if applicable)			
Office Sought	District (if Senate or House)			
Late reports are subject to possible civil and criminal penalties. Purs candidate's committee, and the chairperson, for any other type of co	suant to lowa Code sections 68B.32A mmittee, is the individual responsible	A(7) and 68 e for filing	BA.401(3), the car timely and accura	ndidate, for a te reports.
SIGNATURE OF PERSON FILING REPORT	TELEPHONE		DATE S	IGNED
I AM FILING A October 14 2014 thru December 31 2014	DEDORT FOR (4) EL FOTION	L VOLNO		
(report date)	Indicate by		-ELECTION YE	AR.
CHECK IF AMENDMENT TO REPORT DATED			nmittoon notes De	to of Florina
☐ Check if this is final (termination) report and attach Notice of (You must continue to file reports until a DR-3 is filed.)	Dissolution Form DR-3.	Nov. 4 2 County &	Local Committees ction is held	
STATEMENT OF CASH ON HAND		I SATERIAL MARKATAN		
cash on hand at the beginning of the reporting period. (Total committee. This amount MUST be the same as the confittee last reporting period or must be zero if this is first	ash on hand at the end		344.97	
ADD TOTAL MONEY TAKEN IN THIS PERIOD				
Schedule A: Cash Contributions total (Attach Schedul	le A) (*also see in-kind below)		780.00	
Schedule F: Loans Received total (Attach Schedule F				
Schedule H: Total Sales of Campaign Property (Attac				
(Schedule Happlies to Candidates' Comm	ittees Only)			
	SUB-TOTAL	\$	1,124.97	
SUBTRACT TOTAL MONEY SPENT THIS PERIOD				
Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)		1,007.88	
Schedule F: Loan Repayments total (Attach Schedule	e F)			
CASH ON HAND at the end of this reporting period (if final repo	rt balance must be zero)	\$	117.09	
**UNPAID BILLS (From Schedule D - Attach Schedule D)		\$		CIPE in colon book in the second of a
IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedu	ule E)	\$		
OUTSTANDING LOANS (From Schedule F - Attach Schedule				
CONSULTANT BREAKDOWN (Schedule G Attached?)			YES	NO
CANDIDATE COMMITTEES ONLY:		Pennin		
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attac	h Schedule H)	\$		
STATE COMMITTEES: Submit a reconciled campaign account	bank statement in January of each	h vear		

For Instructions, See Back of Form

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SCHEDULE MONETARY (Rev. 12/13) RECEIPTS

CONTRIBUTIONS -- MONEY TAKEN IN (Including candidate's personal funds)

COMMIT	TEE NAME	(Must be	same	e as on Stater	nent of Orga	nization)	
The	Comm	HEC	to	Elect	Dine	Themoson	

CHECK THIS BOX IF AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

FOR DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FUND- RAISER INCOME
10-15-2014	CK# ₁₂₂₁	Marshall County Republican Women 1704 Olson Way Marshalltown, Iowa 50158	None	\$250.00	11100111
10-15-2014	ID# CK# I445	Marshall County Central Committee PO Box 913 Marshalltown, Iowa 50158	None	250.00	
10-22-2014	ID# CK# 6120	Virtus Brockman 2656 Jessup Ave Melbourne, Iowa 50162	None	100.00	
11-14-2014	RD# CK# 1715	Kevin Dull PO Box 906 Marshalltown, Jowa 50158	None	150.00	
11-15-2014	CK# _{Cash}	Renee Brygelson 911 N. Center St Marshalltown, Iowa 50158	None	30.00	
	ID#				
The second secon	ID# CK#				
	ID# CK#				
	CK#				
	ID#				
	The second of th	TOTAL (if last no	SUB-TOTAL ge of this schedule)	s 780.00	- Continue on the sales of
Disales us lav.	on time and data at the	TOTAL (It last pa		\$ 780.00	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no applicable in the relationship column.

Page of familial relationship. (for Schedule A)

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMETTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

The Committee to Elect Dave Thompson

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
11-26-2014	ID# CK#11262014	Dave Thompson 605 Westwood Dr Marshalltown, Iowa 50158	Advertising-gasoline reimbursement	\$ 1,007.88
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
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	CK#			1
	ID#			
	CK#			
	ID#			
	CK#			
	ID#			
	CK#			
			SUB-TOTAL	\$ 1,007.88

TOTAL (if last page of this schedule) \$ 1,007.88

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule Hinstructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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> > (for Schedule B)